NUMBER OF COPIES RECL DISTRIBU SANTA FI FILE U.S.G.S. LAND OFFICE TRANSPORTER PRORATION OFFICE		CERTIFIC	CATE OF CO TRANSPOR	ITA FE, NEW MPLIANC RTOIL AN	E A D N	ND AUTHORIZAT	пон	FORM C-110 (Rev. 7-60)	
Company or Oper		I FILE THE O	RIGINAL AND 4	COPIES WITH	<u>THE</u> [] I	APPROPRIATE OFFICE	Ξ	Well No.	
Unit Letter	I Section	Township 17-1	Range	36-E		County Lea		49	
Pool			<u> </u>	Kind of Lease (State, Fed, Fee) State					
If well produces oil or condensate give location of tanks			Unit Letter Section 1			Township 17-9			
		n an Arsan An Anna Anna An	·		•. • • •	ess to which approved copy		rm is to be sent)	
	porter of casing head		Date Con-			ess to which approved copy	of this fo	rm is to be sent)	
Authorized trans	nected								
	Change in Tr Oil Casing he	an sporter <i>(check on</i> Dry ead gas . D Con	e) Gas	Change in C Other (explo	)wners	ship [			
Remarks The undersign	ed certifies that the		So.	cony Mobil	. 01	1 Company's - Sta		Well No. 2.	
		this the		fa <sup>*</sup>		_ , 19			
Approved by Terffe	and the second s			By Title Company	DRIGI SIGN	NAL) H. E. Asb			
Date ,	//			Address			10	·	